



**State of New Jersey**  
**DEPARTMENT OF COMMUNITY AFFAIRS**  
101 SOUTH BROAD STREET  
PO Box 811  
TRENTON, NJ 08625-0811

RICHARD J. CODEY  
ACTING GOVERNOR

SUSAN BASS LEVIN  
COMMISSIONER

TO: FUEL VENDORS

FROM: CLARICE SABREE-SYLLA, SUPERVISOR  
Office of Low-Income Energy Conservation

RE: FUEL VENDOR'S AGREEMENT

Attached you will find a copy of the new Fuel Vendor's Agreement for the Home Energy Assistance Program. This agreement replaces the one you last signed and must be submitted for your company to continue to receive Home Energy Assistance Program payments. Due to changes in the Home Energy Assistance Program and the database use to process benefits, starting this year fuel vendors will receive direct payments **for emergency fuel deliveries. Regular benefits will continue to be a two party check mailed to the customer.** Only Vendors who sign and return a **notarized agreement** will be approved to receive payments from the Home Energy Assistance Program. Only original documents with a raised NOTARY seal will be accepted (no photocopies, e-mails or faxes). Please indicate what counties your company serves.

Please mail the Vendor Agreement to the address below:

DEPARTMENT OF COMMUNITY AFFAIRS  
DIVISION OF COMMUNITY RESOURCES  
OFFICE OF LOW INCOME ENERGY CONSERVATION  
101 SOUTH BROAD ST, PO BOX 811  
TRENTON, NJ 08625

ATTENTION: MIGUEL A GONZALEZ  
HOME ENERGY ASSISTANCE PROGRAM

If you have any questions or concerns contact Miguel A Gonzalez, Home Energy Assistance Coordinator at (609) 292-3374 or via e-mail at [mgonzalez@dca.state.nj.us](mailto:mgonzalez@dca.state.nj.us).



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CN 811  
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This agreement effective upon it's signing, is made between \_\_\_\_\_,  
an energy vendor with New Jersey heating accounts, hereinafter known as the Supplier,  
and the State of New Jersey Department of Community Affairs hereinafter known as  
DCA.

**Section A**

DCA agrees to certify applicant households (or individuals), hereinafter referred to as  
Participants, who are eligible to obtain Home Energy Assistance hereinafter referred to as  
HEA. Payments will be maid as two party checks that will be mailed directly to the fuel  
Supplier of record or the eligible Participant.

**Section B**

In consideration of the foregoing undertaking by DCA, the Supplier hereby agrees:

1. To apply the HEA payment to the annual cost of the fuel supplied after the date of  
this Agreement and to bill the participant only for the cost of fuel supplied in  
excess of the credit available. DCA shall not be responsible for the cost of fuel  
supplied in excess of the amount shown on the two party check;
2. To deliver only to the premises and for the person specified on the two party  
check;
3. To refrain from discrimination against Participants in regards to terms and  
conditions of sale, credits, delivery or price; or in regard to race, age, color, creed,  
sex, national origin, marital status, handicap, or political belief;
4. To make an emergency delivery equivalent to one hundred and fifty (150) gallons  
of fuel oil or lesser amount if mutually agreeable to Participant and Supplier  
without surcharge or service fee, provided the participant has sufficient funds to  
pay for such delivery.
5. To maintain for each individual Participant an accurate account of HEA benefit  
checks received and deliveries made and any return of unused credit made by the  
Supplier in accordance with requirements established by DCA and subject to  
State audit.
6. To immediately refund by check all balances unused if the Participant ceases to  
be a customer do to a change of fuel type, a move to a new address, or has a credit  
balance after April 30<sup>th</sup>.

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7. To refrain from disclosing information about the Participant with respect to his/her participation in the HEA program to anyone other than persons directly connected with the administration or distribution of fuel by the Supplier.

**Section C**

Either party upon 30 days written notice to the other party may terminate this agreement. DCA can terminate this agreement, in its sole discretion, upon the Suppliers failure to comply with any of the conditions contained in Section B upon 7 days written notice. In the event this agreement is terminated, the Supplier shall fully account, within 7 days, for all funds received, deliveries made and refund unused funds directly to DCA with such accounting.

\_\_\_\_\_  
**HOME ENERGY FUEL SUPPLIER    DATE**

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**NOTARY PUBLIC**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**CRARICE SABREE-SYLLA, SUPERVISOR  
OFFICE OF LOW INCOME ENERGY  
CONSERVATION**

\_\_\_\_\_  
**DATE**

**PAYMENT INFORMATION**

If the name of your business is different than shown above, or if your business is known by other trade names, please provide the following information:

Make Checks Payable to:

Trading as, if different from above:

\_\_\_\_\_  
NAME

\_\_\_\_\_  
NAME

\_\_\_\_\_  
STREET

\_\_\_\_\_  
STREET

\_\_\_\_\_  
CITY, ZIP CODE

\_\_\_\_\_  
CITY, ZIP CODE

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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**Section D - Services**

Please check off all that apply

**Counties of Service:**

01	Atlantic	
02	Bergen	
03	Burlington	
04	Camden	
05	Cape May	
06	Cumberland	
07	Essex	

08	Gloucester	
12	Hudson	
09	Hunterdon	
10	Mercer	
11	Middlesex	
13	Monmouth	
14	Morris	

15	Ocean	
16	Passaic	
17	Salem	
21	Somerset	
18	Sussex	
19	Union	
20	Warren	

Please check off all that apply

**Types of Service:**

01	Coal	
02	Electricity	
03	Kerosene	
04	Natural Gas	
05	Oil	
06	Propane	
07	Wood	